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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	GPC0104PUSA
		Application Number	
Title of Invention	Heterobicyclic Compounds as Pharmaceutically Active Agents		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

- ☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

Applicant Information:

Applicant 1					Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	Anil		Koul		
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Berchem	Country Of Residenceⁱ	BE		
Citizenship under 37 CFR 1.41(b)ⁱ		BE			
Mailing Address of Applicant:					
Address 1	Coramannstraat 2				
Address 2					
City	Berchem	State/Province			
Postal Code	2600	Countryⁱ	BE		
Applicant 2					Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	Bert		Klebl		
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Gunzenelhofen	Country Of Residenceⁱ	DE		
Citizenship under 37 CFR 1.41(b)ⁱ		DE			
Mailing Address of Applicant:					
Address 1	Imhoffstrasse 14A				
Address 2					
City	Gunzenelhofen	State/Province			
Postal Code	82294	Countryⁱ	DE		
Applicant 3					Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	Gerhard		Muller		
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Utting	Country Of Residenceⁱ	DE		

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Citizenship under 37 CFR 1.41(b) i		DE	
Mailing Address of Applicant:			
Address 1		Am Bernrieder Holz 9b	
Address 2			
City	Utting	State/Province	
Postal Code	86919	Countryⁱ	DE
Applicant 4			Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
<input type="radio"/> Party of Interest under 35 U.S.C. 118			
Prefix	Given Name	Middle Name	Family Name
	Andrea		Missio
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Munich	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) i		DE	

Mailing Address of Applicant:			
Address 1		Wurmtalstr. 162 A	
Address 2			
City	Munich	State/Province	
Postal Code	81375	Countryⁱ	DE
Applicant 5			Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
<input type="radio"/> Party of Interest under 35 U.S.C. 118			
Prefix	Given Name	Middle Name	Family Name
	Wilfried		Schwab
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Neuried	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) i		DE	

Mailing Address of Applicant:			
Address 1		Fasanenweg 9	
Address 2			
City	Neuried	State/Province	
Postal Code	82061	Countryⁱ	DE
Applicant 6			Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
<input type="radio"/> Party of Interest under 35 U.S.C. 118			
Prefix	Given Name	Middle Name	Family Name
	Doris		Hafenbradl
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Pullach	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) i		DE	

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Mailing Address of Applicant:			
Address 1	Schillerstrasse 9		
Address 2			
City	Pullach	State/Province	
Postal Code	82049	Countryⁱ	DE
Applicant 7			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	Lars		Neumann
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Munich	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) ⁱ		DE	
Mailing Address of Applicant:			
Address 1	Badstrasse 23		
Address 2			
City	Munich	State/Province	
Postal Code	81379	Countryⁱ	DE
Applicant 8			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	Marc-Nicola		Sommer
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Munich	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) ⁱ		DE	
Mailing Address of Applicant:			
Address 1	Lindenschmitstr 29A		
Address 2			
City	Munich	State/Province	
Postal Code	81371	Countryⁱ	DE
Applicant 9			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	Stefan		Muller
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Munich	Country Of Residenceⁱ	DE
Citizenship under 37 CFR 1.41(b) ⁱ		DE	

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Mailing Address of Applicant:				
Address 1		Thalkirchner Str. 184		
Address 2				
City	Munich	State/Province		
Postal Code	81371	Countryⁱ	DE	
Applicant 10				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Edmund		Hoppe	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Krailling	Country Of Residenceⁱ	DE	
Citizenship under 37 CFR 1.41(b) ⁱ		DE		
Mailing Address of Applicant:				
Address 1		Gartenstrasse 12		
Address 2				
City	Krailling	State/Province		
Postal Code	82152	Countryⁱ	DE	
Applicant 11				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Achim		Freisleben	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Munich	Country Of Residenceⁱ	DE	
Citizenship under 37 CFR 1.41(b) ⁱ		DE		
Mailing Address of Applicant:				
Address 1		Barbierstrasse 2a		
Address 2				
City	Munich	State/Province		
Postal Code	81375	Countryⁱ	DE	
Applicant 12				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Alexander		Backes	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Munich	Country Of Residenceⁱ	DE	
Citizenship under 37 CFR 1.41(b) ⁱ		DE		

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Mailing Address of Applicant:				
Address 1		Beer-Walbrunn-Strasse 30		
Address 2				
City	Munich	State/Province		
Postal Code		81247	Countryⁱ	DE
Applicant 13 Remove				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Christian		Hartung	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Munich	Country Of Residenceⁱ		DE
Citizenship under 37 CFR 1.41(b) ⁱ		DE		
Mailing Address of Applicant:				
Address 1		Kalmanstrasse 2a		
Address 2				
City	Munich	State/Province		
Postal Code		81243	Countryⁱ	DE
Applicant 14 Remove				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Beatrice		Felber	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Eching	Country Of Residenceⁱ		DE
Citizenship under 37 CFR 1.41(b) ⁱ		DE		
Mailing Address of Applicant:				
Address 1		Schillerstrasse 9A		
Address 2				
City	Eching	State/Province		
Postal Code		85386	Countryⁱ	DE
Applicant 15 Remove				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Birgit		Zech	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Munich	Country Of Residenceⁱ		DE
Citizenship under 37 CFR 1.41(b) ⁱ		DE		

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Mailing Address of Applicant:				
Address 1		Filchnerstr. 46		
Address 2				
City	Munich	State/Province		
Postal Code	81476	Countryⁱ	DE	
Applicant 16				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Ola		Engkvist	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Bjarnum	Country Of Residenceⁱ	SE	
Citizenship under 37 CFR 1.41(b) ⁱ		SE		
Mailing Address of Applicant:				
Address 1		Ubbarp		
Address 2				
City	Bjarnum	State/Province		
Postal Code	S-280 20	Countryⁱ	SE	
Applicant 17				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Gyorgy		Keri	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Budapest	Country Of Residenceⁱ	HU	
Citizenship under 37 CFR 1.41(b) ⁱ		HU		
Mailing Address of Applicant:				
Address 1		Modori u. 4/A		
Address 2				
City	Budapest	State/Province		
Postal Code	H-1021	Countryⁱ	HU	
Applicant 18				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Laszlo		Orfi	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Budapest	Country Of Residenceⁱ	HU	
Citizenship under 37 CFR 1.41(b) ⁱ		HU		

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Mailing Address of Applicant:			
Address 1	Batthyany u. 92		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1161	Countryⁱ	HU
Applicant 19			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
			<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name
	Peter		Banhegyi
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Budapest	Country Of Residenceⁱ	HU
Citizenship under 37 CFR 1.41(b) ⁱ		HU	
Mailing Address of Applicant:			
Address 1	Fuveszkert u. 6. 2.3m.25		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1083	Countryⁱ	HU
Applicant 20			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
			<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name
	Zoltan		Greff
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Budapest	Country Of Residenceⁱ	HU
Citizenship under 37 CFR 1.41(b) ⁱ		HU	
Mailing Address of Applicant:			
Address 1	Gyongyvirag u.8		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1028	Countryⁱ	HU
Applicant 21			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
			<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name
	Zoltan		Horvath
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Budapest	Country Of Residenceⁱ	HU
Citizenship under 37 CFR 1.41(b) ⁱ		HU	

Application Data Sheet 37 CFR 1.76		Attorney Docket Number	GPC0104PUSA
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Mailing Address of Applicant:				
Address 1		Vorosvari ut 11		
Address 2				
City	Budapest	State/Province		
Postal Code	H-1035	Countryⁱ	HU	
Applicant 22				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Zoltan		Varga	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Kolesd	Country Of Residenceⁱ	HU	
Citizenship under 37 CFR 1.41(b) ⁱ		HU		
Mailing Address of Applicant:				
Address 1		Rakoczi u. 41		
Address 2				
City	Kolesd	State/Province		
Postal Code	H-7052	Countryⁱ	HU	
Applicant 23				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Peter		Marko	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Budapest	Country Of Residenceⁱ	HU	
Citizenship under 37 CFR 1.41(b) ⁱ		HU		
Mailing Address of Applicant:				
Address 1		Hunyadvar u. 8		
Address 2				
City	Budapest	State/Province		
Postal Code	H-1163	Countryⁱ	HU	
Applicant 24				Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
	Janos		Pato	
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Budapest	Country Of Residenceⁱ	HU	
Citizenship under 37 CFR 1.41(b) ⁱ		HU		

Application Data Sheet 37 CFR 1.76		Attorney Docket Number	GPC0104PUSA
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Mailing Address of Applicant:			
Address 1	Hejo u. 4		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1147	Countryⁱ	HU
Applicant 25			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
			<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name
	Istvan		Szabadkai
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Budapest	Country Of Residenceⁱ	HU
Citizenship under 37 CFR 1.41(b) ⁱ		HU	
Mailing Address of Applicant:			
Address 1	Margo Tivadar utca 182		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1186	Countryⁱ	HU
Applicant 26			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
			<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name
	Zsolt		Szekelyhidi
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Budapest	Country Of Residenceⁱ	HU
Citizenship under 37 CFR 1.41(b) ⁱ		HU	
Mailing Address of Applicant:			
Address 1	Gogol utca 15B		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1133	Countryⁱ	HU
Applicant 27			Remove
Applicant Authority	<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117
			<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name
	Frigyes		Waczek
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Budapest	Country Of Residenceⁱ	HU
Citizenship under 37 CFR 1.41(b) ⁱ		HU	

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Mailing Address of Applicant:			
Address 1	Ady Endre ut 130		
Address 2			
City	Budapest	State/Province	
Postal Code	H-1195	Country	HU
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button. <input type="button" value="Add"/>			

Correspondence Information:

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).			
<input type="checkbox"/> An Address is being provided for the correspondence information of this application.			
Customer Number	22045		
Email Address		<input type="button" value="Add Email"/>	<input type="button" value="Remove Email"/>

Application Information:

Title of the Invention	Heterobicyclic Compounds as Pharmaceutically Active Agents		
Attorney Docket Number	GPC0104PUSA	Small Entity Status Claimed	<input checked="" type="checkbox"/>
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)		Suggested Figure for Publication (if any)	
Publication Information:			
<input type="checkbox"/> Request Early Publication (Fee required at time of Request 37 CFR 1.219)			
Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.			

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> US Representative (37 CFR 11.9)
Customer Number	22045		

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Domestic Priority Information:

This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.

Prior Application Status	Abandoned	Remove	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
	non provisional of	60/502606	2003-09-15
Prior Application Status	Abandoned	Remove	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
	non provisional of	60/551341	2004-03-10
Prior Application Status	Abandoned	Remove	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
	non provisional of	60/577043	2004-06-07

Additional Domestic Priority Data may be generated within this form by selecting the Add button. [Add](#)

Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

Remove			
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
03020616.3	EP	2003-09-10	<input checked="" type="radio"/> Yes <input type="radio"/> No
Remove			
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
04004891.0	EP	2004-03-02	<input checked="" type="radio"/> Yes <input type="radio"/> No
Remove			
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
04012814.2	EP	2004-05-28	<input checked="" type="radio"/> Yes <input type="radio"/> No

Additional Foreign Priority Data may be generated within this form by selecting the Add button. [Add](#)

Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

Assignee 1	Remove
If the Assignee is an Organization check here. <input checked="" type="checkbox"/>	
Organization Name	GPC Biotech AG

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Mailing Address Information:			
Address 1		Fraunhoferstrasse 20	
Address 2			
City		Munich	State/Province
Country ⁱ	DE	Postal Code	82152
Phone Number			Fax Number
Email Address			
Additional Assignee Data may be generated within this form by selecting the Add button. <input type="button" value="Add"/>			

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature	/John E. Nemazi/			Date (YYYY-MM-DD)	2006-07-12
First Name	John	Last Name	Nemazi	Registration Number	30876

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